


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90454 003 ***150.00

DOCUMENT # P98000024292 1. Entity Name TOWER REAL ESTATE INC.																							
Principal Place of Business 9690 W. SAMPLE ROAD STE. 102 CORAL SPRINGS, FL 33065		Mailing Address 9690 W. SAMPLE ROAD STE. 102 CORAL SPRINGS, FL 33065																					
2. Principal Place of Business <u>9690 W. SAMPLE ROAD</u> Suite, Apt. #, etc. <u>SUITE 104</u> City & State <u>CORAL SPRINGS, FL</u> Zip <u>33065</u> Country <u>USA</u>		3. Mailing Address <u>9690 W. SAMPLE ROAD</u> Suite, Apt. #, etc. <u>SUITE 104</u> City & State <u>CORAL SPRINGS, FL</u> Zip <u>33065</u> Country <u>USA</u>																					
6. Name and Address of Current Registered Agent INGENITO, SAMUEL 9690 W. SAMPLE ROAD SUITE 102 CORAL SPRINGS, FL 33065		7. Name and Address of New Registered Agent Name <u>INGENITO, SAMUEL</u> Street Address (P.O. Box Number is Not Acceptable) <u>9690 W. SAMPLE ROAD</u> <u>SUITE 104</u> City <u>CORAL SPRINGS</u> <u>FL</u> Zip Code <u>33065</u>																					
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>[Signature]</u> DATE <u>3/28/06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																							
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																					
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">P</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2">INGENITO, SAMUEL C</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">9690 W. SAMPLE ROAD STE. 102</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">CORAL SPRINGS, FL 33065</td> </tr> </table>		TITLE	P	<input type="checkbox"/> Delete	NAME	INGENITO, SAMUEL C		STREET ADDRESS	9690 W. SAMPLE ROAD STE. 102		CITY-ST-ZIP	CORAL SPRINGS, FL 33065		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">TITLE</td> <td style="width: 70%;">[Change] <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td><u>9690 W. SAMPLE ROAD SUITE 104</u></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td><u>CORAL SPRINGS, FL 33065</u></td> </tr> </table>		TITLE	[Change] <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS	<u>9690 W. SAMPLE ROAD SUITE 104</u>	CITY-ST-ZIP	<u>CORAL SPRINGS, FL 33065</u>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																							
SIGNATURE: <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>3/28/06</u> Daytime Phone # <u>954-298-0535</u>																					